



BILLING CODE 4165-16

## DEPARTMENT OF HEALTH AND HUMAN SERVICES

### Indian Health Service

#### **Request For Public Comment: 30-Day Information Collection: Application for Participation in the IHS Scholarship Program**

**AGENCY:** Indian Health Service, HHS.

**ACTION:** Notice and request for comments. Request for extension of approval.

**SUMMARY:** In compliance the Paperwork Reduction Act (PRA) of 1995, the Indian Health Service (IHS) invites the general public to comment on the information collection titled, “Application for Participation in the IHS Scholarship Program,” Office of Management and Budget (OMB) Control No. 0917-0006. IHS is requesting OMB to approve an extension for this collection, which expires on March 31, 2020. This proposed information collection project was previously published in the Federal Register on December 17, 2019, and allowed 60 days for public comment, as required by the PRA. The IHS received no comments regarding this collection. The purpose of this notice is to allow 30 days for public comment to be submitted directly to OMB.

**DATES:** *Comment Due Date:* **[INSERT 30 DAYS AFTER DATE OF PUBLICATION IN THE FEDERAL REGISTER]**. Your comments regarding this information collection are best assured of having full effect if received within 30 days of the date of this publication.

**ADDRESSES:** *Direct Your Comments to OMB:* Send your comments and suggestions regarding the proposed information collection contained in this notice, especially regarding the estimated public burden and associated response time to: Office of

Management and Budget, Office of Regulatory Affairs, New Executive Office Building, Room 10235, Washington, DC 20503, Attention: Desk Officer for IHS.

**SUPPLEMENTARY INFORMATION:**

*Information Collection:*

*Title:* “Application for Participation in the IHS Scholarship Program,” OMB Control No.

0917-0006. *Type of Information Collection Request:* Extension of the currently

approved information collection “Application for Participation in the IHS Scholarship

Program,” OMB Control No. 0917-0006. *Form Number(s):* IHS-856-07 through 856-

16, IHS-856-19 through 856-23, IHS-817, and IHS-818 are retained for use by the IHS

Scholarship Program (IHSSP) as part of this current Information Collection Request.

Reporting forms are found on the IHS Website at [www.ihs.gov/scholarship](http://www.ihs.gov/scholarship). Forms IHS-

856-03, IHS-856-05, and IHS-856-06 have been moved to the online application process

and can be found at [www.ihs.gov/scholarship/applynow/](http://www.ihs.gov/scholarship/applynow/). *Need and Use of Information*

*Collection:* The IHS Scholarship Branch needs this information for program

administration and uses the information to: solicit, process, and award IHS Pre-graduate,

Preparatory, and/or Health Professions Scholarship recipients; monitor the academic

performance of recipients; and to place recipients at payback sites. The IHSSP

application is electronically available on the internet at the IHS Website at:

<http://www.ihs.gov/scholarship/applynow/>. *Affected Public:* Individuals, not-for-profit

institutions and State, local or Tribal Governments. *Type of Respondents:* Students

pursuing health care professions.

The table below provides: Types of data collection instruments, Estimated number of

respondents, Number of responses per respondent, Annual number of responses, Average

burden hour per response, and Total annual burden hours.

\*For ease of understanding, burden hours are also provided in actual minutes.

Data Collection Instrument(s)	Number of respondents	Responses per respondent	Total annual response	Burden hour per response*	Annual burden hours
Scholarship Online Application	850	1	850	1.00 (60 min)	850
Verification of Acceptance or Decline of Award (IHS-856-7)	300	1	300	0.13 ( 8 min)	39
Recipient's Initial Program Progress Report (IHS-856-8)	800	1	800	0.13 ( 8 min)	104
Notification of Academic Problem (IHS-856-9)	20	1	20	0.13 ( 8 min)	3
Change of Status (IHS-856-10)	50	1	50	.045 (25 min)	21
Request for Approval of Deferment (IHS-856-11)	60	1	60	0.13 ( 8 min)	8
Preferred Placement (IHS-856-12)	150	1	150	0.50 (30 min)	75
Notice of Impending Graduation (IHS-856-13)	170	1	170	0.17 (10 min)	28
Notification of Deferment Program (IHS-856-14)	60	1	60	0.13 (8 min)	8
Placement Update (IHS-856-15)	170	1	170	0.18 (11 min)	31
Annual Status Report (IHS-856-16)	200	1	200	0.25 (15 min)	50
Lost Stipend Payment (IHS-856-19)	10	1	10	0.13 ( 8 min)	2
Summer School Request (IHS-856-21)	100	1	100	0.10 ( 6 min)	10
Change of Name or Address (IHS-856-22)	20	1	20	0.13 (8 min)	3
Request for Credit Validation (IHS-856-23)	30	1	30	0.10 (6 min)	3
Scholarship Program Agreement (IHS-817)	60	1	60	0.16 (10 min)	10
Health Professions Contract (IHS-818)	225	1	225	0.16 (10min)	38
Total			3275		1283

There are no direct costs to respondents other than their time to voluntarily complete the forms and submit them for consideration. The estimated cost for the federal government is \$145,223.00 (contractor) to work on the program with IHS program staff.

*Requests for Comments:* The IHS requests your comments on this collection concerning: (a) the necessity of this information collection for the proper performance of the functions of the agency, including whether the information will have practical utility; (b) the accuracy of the agency's estimate of the burden (hours and cost) of the collection of information, including the validity of the methodology and assumptions used; (c) ways we could enhance the quality, utility, and clarity of the information to be collected; and (d) ways we could minimize the burden of the collection of the information on the respondents.

**Michael D. Weahkee,**

*RADM, Assistant Surgeon General,*

*U.S. Public Health Service,*

*Principal Deputy Director, Indian Health Service.*

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